

IN THE CIRCUIT/CHANCERY COURT OF SHELBY COUNTY TENNESSEE

Plaintiff, _____

Vs.

DOCKET NO: _____

Defendant, _____

PETITION AND AFFIDAVIT TO ENFORCE CHILD SUPPORT

(4 pages)

Comes now the Petitioner, _____, under
T.C. A. Title 36, Chapter 5, stating that:

1. Petitioner is a resident of _____ and lives at
County

_____, Zip code _____
Street Address, City, State

Petitioner's date of birth ____/____/____ Social Security # _____

2. Respondent is a resident of _____ and lives at
County

_____, Zip code _____
Street Address, City, State

Respondent's date of birth ____/____/____ Social Security # _____

3. The child(ren) for whom support is sought is (are):

Name _____ Birth date ____/____/____

Name _____ Birth date ____/____/____

Name _____ Birth date ____/____/____

Name _____ Birth date ____/____/____

4. This (these) child(ren) reside at _____

5. Petitioner's relationship to the (these) child(ren) is _____

6. When and how much was his/her last contribution for support? _____

7. Is there an order for support in any Court? _____. If so, name the Court, amount and docket number. _____

8. Respondent is employed by: (Give company name and address)

9. Petitioner seeks to: (***Check appropriate items***)
_____ (a) enforce support
_____ (b) recover arrearages due in the amount of \$_____

The above facts are true and correct to the best of my knowledge and belief.

Petitioner's Signature: _____

Address: _____

Telephone Number: _____

State of Tennessee

County of Shelby

Sworn to and Subscribed before me on this _____ day of _____ 20____.

Notary Public or Deputy Clerk

Respondent's Signature _____

Address: _____

Telephone Number: _____

State of Tennessee

County of Shelby

Sworn to and Subscribed before me on this _____ day of _____ 20____.

Notary Public or Deputy Clerk

FIAT

To the Clerk and Master of the Shelby County Chancery Court:

Issue notice to the respondent that a hearing regarding the above petition will be heard in Part ____ of Chancery Court on the ____ day of _____, 20____ at ____: _____. M.

JUDGE/CHANCELLOR

DATE

REFERENCE TO DIVORCE REFEREE

The above matter is referred to the Divorce Referee for a hearing regarding the above requested relief.

This cause is set for Hearing on the _____ day of _____, 20_____,
at 1:00 p.m. at the following location: Shelby County Courthouse
140 Adams, Room 327
Memphis, TN 38103
Phone: 901-545-4036

JUDGE/CHANCELLOR

DATE

CERTIFICATE OF SERVICE

I certify that a copy of this Petition, with Hearing date included, was mailed to the Respondent at _____ by United States Mail prepaid this _____ day of _____, 20_____.

DEPUTY COURT CLERK

IN THE CIRCUIT/CHANCERY COURT OF SHELBY COUNTY TENNESSEE

Plaintiff, _____

Vs.

DOCKET NO: _____

Defendant, _____

RECOMMENDATIONS OF DIVORCE REFEREE

_____ at the ____ plaintiff's ____ defendant's cost.

DIVORCE REFEREE

DATE

ORDER TO ENFORCE CHILD SUPPORT

The above recommendations of the Divorce Referee are confirmed and so ordered by the court.

JUDGE/CHANCELLOR

DATE

Form: P0-09/04